## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

1062096

CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			41					RATE	FEE		RATE	FEE
FÖR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			√∫ minus 20=		* 21			X\$ 9=	*.	OR	X\$18=	318
INDEPENDENT CLAIMS			ス minus 3 =		*			X42=	<del></del> .	OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT								+140=		OR	+280=	
* If the difference in column 1 is less than ze				ro, enter	r "0" in c	olumn 2		TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALL	ENTITY	OR	OTHER SMALL I	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF M	Minus	***	T CL AIM	=		X42=		OR	X84=	
	FINST PRESE	TATION OF MI		ENDEN	CLAIIVI		]	+140=		OR	+280=	
si .		(*,	. *					TOTAL ADDIT. FEE		OR	TOTAL ADDIT FEE	o'
		(Column 1)			mn 2)	(Column 3)		:		2.12	e e e e e e e e e e e e e e e e e e e	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR.	X\$18=	
	Independent	*	Minus	***	T CL AINA	=	4	X42=		OR	X84=	
╙	FIRST PRESENTATION OF MULTIPLE D			ENDEN	CLAIIVI			+140=	i a i	OR	+280=	
						*		TOTAL ADDIT. FEE		OR	TOTAL ADDIT FEE	,
	(Column 1) (Colur					(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	-	= .	1	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	T CLAIM	=		X42=		OR	X84=	
-	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLA						ı	+140=		OR	+280=	
**	<ul> <li>If the entry in column 1 is less than the entry in column 2, write "0" in column 3.</li> <li>If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."</li> </ul>									OR	TOTAL	
** If the Highest Number Previously Paid For IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

FORM PTO-875 (Rev. 12/02)